



Hospice Residence (Inpatient)

| | FEDERAL | RECOMMENDATION |
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| NURSE CALL | | |
| Hospice Residence (Inpatient) | L323-Equipped with a device for calling staff | Electronic call system from patient bed, water closet and bathing fixture. |
| Hospice Residence (Inpatient-8 beds or less) | L323-Equipped with a device for calling staff | Hand bell is acceptable if all bedrooms are located in one area. |
| LIGHTING | | |
| Hospice Residence (Inpatient) | L316 | <ul style="list-style-type: none"> • General Room Lighting 10 - 20fc • Reading 30fc (Additional as required for nursing care) • Handwash Sinks 30fc • Kitchens (task level) 30fc work areas 20fc storage • Charting/medication areas 50fc <p>*Additional lighting as needed for patient care (may be portable)</p> |

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| Hospice Residence (Inpatient - 8 beds or less) | L316 | <ul style="list-style-type: none"> General Room Lighting 10-20fc Reading 30fc (Additional as required for nursing care) Handwash Sinks 30fc Kitchens (task level) 30fc work areas 20fc storage Charting/medication areas 50fc <p>*Additional lighting as needed for patient care (may be portable)</p> |
| KITCHENS | | |
| Dishwasher | | |
| Hospice Residence (Inpatient) | L307 - Sanitation L329 - Procure, store, prepare, distribute, & serve food in a sanitary manner | Dishes, pots/pans and utensils cleaned and sanitized in accordance with Michigan Food Sanitation Code. |
| Hospice Residence (Inpatient - 8 beds or less) | L307 - Sanitation L329 - Procure, store, prepare, distribute, & serve food in a sanitary manner | Dishes, pots/pans and utensils cleaned and sanitized in accordance with Michigan Food Sanitation Code. |
| Exhaust Hood | | |
| Hospice Residence (Inpatient) | L307-Sanitation L329-Sanitary manner | Cooking equipment must be ventilated in accordance with the Michigan Food Sanitation Code. |
| Hospice Residence (Inpatient - 8 beds or less) | L307-Sanitation L329-Sanitary manner | Hood over cooking area, ventilated to outside. |
| Sink (handwash) | | |
| Hospice Residence (Inpatient) | L307-Sanitation L329-Sanitary manner | Required with gooseneck spout and wrist blades. |

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| Hospice Residence (Inpatient - 8 beds or less) | L307-Sanitation L329-Sanitary manner | Required with gooseneck spout and wrist blades. |
| Cooking Equipment | | |
| Hospice Residence (Inpatient) | | Commercial NSF rated restaurant series equipment, or equivalent. |
| Hospice Residence (Inpatient - 8 beds or less) | | Heavy duty rated restaurant series equipment. |
| Janitor Closet (kitchen) | | |
| Hospice Residence (Inpatient) | L307-Sanitation | Service sink required. Separate equipment and storage areas. |
| Hospice Residence (Inpatient - 8 beds or less) | L307-Sanitation | Service sink required. Separate equipment may be stored with other residence cleaning supplies. |
| CORRIDORS | | |
| 8' Width Requirement | | |
| Hospice Residence (Inpatient) | | As per Life Safety Code |
| Hospice Residence (Inpatient - 8 beds or less) | | As per Life Safety Code |
| Handrails | | |
| Hospice Residence (Inpatient) | Not Required | Optional, at least one side of corridor recommended. |
| Hospice Residence (Inpatient - 8 beds or less) | Not Required | Optional |

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| EMERGENCY GENERATOR | | |
| Hospice Residence (Inpatient) | | Battery or secondary power source for all critical or life support equipment, including fire alarm, night lights, corridor and exit lights, with evacuation plan. Emergency generator recommended |
| Hospice Residence (Inpatient - 8 beds or less) | | Battery or secondary power source for all critical or life support equipment, including fire alarm, night lights, corridor and exit lights, with evacuation plan. |
| 100'/80' PATIENT ROOM SIZE/OCCUPANCY | | |
| Hospice Residence (Inpatient) | L322 | 100 sf for single bedroom 80 sf per person for 2-person bedroom |
| Hospice Residence (Inpatient - 8 beds or less) | L322 | 100 sf for single bedroom 80 sf per person for 2-person bedroom |
| CENTRAL BATHROOMS | | |
| Hospice Residence (Inpatient) | L317 | One assisted bath (barrier free) |
| Hospice Residence (Inpatient - 8 beds or less) | L317 | One assisted bath (barrier free) |
| DEDICATED STAFF LOCKER/BREAK AREA | | |
| Hospice Residence (Inpatient) | | Dedicated staff area for breaks and storage of staff personal belongings and at least one staff toilet. (May be unisex) |
| Hospice Residence (Inpatient - 8 beds or less) | | Space for breaks and storage of staff personal belongings. Staff toilet that may be shared with the public. (May be unisex) |
| NURSES' WORK AREA | | |
| Hospice Residence (Inpatient) | L344 | Dedicated area for charting and/or storage of medications. |

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| Hospice Residence (Inpatient - 8 beds or less) | L344 | Dedicated area for charting and/or storage of medications. |
| LAUNDRY | | |
| Hospice Residence (Inpatient) | L326 | Commercial grade equipment. Ventilated. Separate soiled linen and processing room. Hand wash lavatory. Equipment requirements flexible if linen processing is contracted out. |
| Hospice Residence (Inpatient - 8 beds or less) | L326 | Separate soiled & processing area. Heavy duty equipment. Ventilated. Equipment requirements flexible if linen processing is contracted out. Hand wash lavatory. |
| SOILED UTILITY/LINEN/JANITOR CLOSET | | |
| Hospice Residence (Inpatient) | L307-Sanitation | Separate soiled utility room required. Separate area or closet for janitor and cleaning supplies. |
| Hospice Residence (Inpatient - 8 beds or less) | L307-Sanitation | Separate soiled work area required. Separate area or closet for janitor and cleaning supplies. |
| WINDOWS/GLASS AREA | | |
| Hospice Residence (Inpatient) | L306-Construction | Window area will at least equal 10% of floor area in bedroom and day space. |
| Hospice Residence (Inpatient - 8 beds or less) | L306-Construction | Window area will at least equal 8% of floor area in bedroom and day space. |
| SEWAGE/WATER | | |
| Hospice Residence (Inpatient) | L307-Sanitation | No on-site waste water disposal systems. Meet local and state requirements. |
| Hospice Residence (Inpatient - 8 beds or less) | L307-Sanitation | Meet local and state requirements. |

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| CEILING HEIGHTS | | |
| Hospice Residence (Inpatient) | L306-Construction | 7'-6" Minimum |
| Hospice Residence (Inpatient - 8 beds or less) | L306-Construction | 7'-6" Minimum |
| ELEVATORS | | |
| Hospice Residence (Inpatient) | L306-Construction | Elevators required where patients are on 2 or more floors. |
| Hospice Residence (Inpatient - 8 beds or less) | L306-Construction | Elevators required where patients are on 2 or more floors. |
| BARRIER FREE TOILETS | | |
| Hospice Residence (Inpatient) | L306-Construction | 10% of adjoining patient toilet rooms and all visitor & employee toilets. |
| Hospice Residence (Inpatient - 8 beds or less) | L306-Construction | 10% of adjoining patient toilet rooms and all visitor & employee toilets. Waiver may be available from Michigan Barrier Free Design Board. |
| ISOLATION ROOM | | |

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| Hospice Residence (Inpatient) | L327 | Hospice agency policy will determine if isolation room is required for airborne pathogens, i.e.; 418.100(I) If hospice does not accept patients with need for isolation, no isolation room is needed. If hospice accepts patients with infectious diseases, it will have at least one private room with attached bath, with proper ventilation. |
| Hospice Residence (Inpatient - 8 beds or less) | L327 | Hospice agency policy will determine if isolation room is required for airborne pathogens, i.e.; 418.100(I) If hospice does not accept patients with need for isolation, no isolation room is needed. If hospice accepts patients with infectious diseases, it will have at least one private room with attached bath, with proper ventilation. |
| 20' OUTSIDE WINDOW CLEARANCE | | |
| Hospice Residence (Inpatient) | | Required |
| Hospice Residence (Inpatient - 8 beds or less) | | Required |
| DAYROOM SPACE | | |
| Hospice Residence (Inpatient) | L311-Private space for visiting | 30 sq. ft/bed with windows |
| Hospice Residence (Inpatient - 8 beds or less) | L311-Private space for visiting | 30 sq. ft/bed with windows |
| WARDROBES | | |
| Hospice Residence (Inpatient) | L320 - Closet Space | Separate wardrobe for each patient |
| Hospice Residence (Inpatient - 8 beds or less) | L320 - Closet Space | Separate wardrobe for each patient |
| PUBLIC TOILET | | |

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| Hospice Residence (Inpatient) | L310-Designed for comfort/privacy of patients & family | At least one public toilet facility is required (May be unisex) |
| Hospice Residence (Inpatient - 8 beds or less) | L310-Designed for comfort/privacy of patients & family | Combined public and staff toilet is acceptable. (May be unisex) |
| EQUIPMENT/FURNITURE | | |
| Installation and Cleaning | | |
| Hospice Residence (Inpatient) | L314 - Decor is homelike L319 - Equipped with a suitable bed & furniture | Equipment/furniture is home-like in appearance. Must address cleaning issues via hospice agency policy. Furniture and equipment in clinical areas* must meet state requirements for cleanability. |
| Hospice Residence (Inpatient - 8 beds or less) | L314 - Decor is homelike L319 - Equipped with a suitable bed & furniture | Equipment/furniture is home-like in appearance. Must address cleaning issues via hospice agency policy. |

* Clinical areas defined as: Exam rooms, Kitchen, Clean/soiled storage areas, and medicine storage.